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Bib Data Sheet

CONFIRMATION NO. 9664

|                                    |   |                     |                               |                                      |
|------------------------------------|---|---------------------|-------------------------------|--------------------------------------|
| <b>SERIAL NUMBER</b><br>10/015,075 | <b>FILING DATE</b><br>12/10/2001<br><b>RULE</b> | <b>CLASS</b><br>348 | <b>GROUP ART UNIT</b><br>2612 | <b>ATTORNEY DOCKET NO.</b><br>P008C3 |
|------------------------------------|---|---------------------|-------------------------------|--------------------------------------|

**APPLICANTS**  
Eric Gullichsen, Sausalito, CA;  
Susan Wyshynski, Sausalito, CA;

**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLICATION IS A CON OF 09/429,697 10/28/1999  
WHICH IS A CON OF 09/128,963 08/04/1998 PAT 6,005,611  
WHICH IS A CON OF 08/250,594 05/27/1994 PAT 5,796,426

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 01/17/2002**

|  |                               |                            |                           |                                |
|--|-------------------------------|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input type="checkbox"/> no   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>9 | <b>TOTAL CLAIMS</b><br>35 | <b>INDEPENDENT CLAIMS</b><br>3 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                               |                            |                           |                                |
| Verified and Acknowledged  | Examiner's Signature          | Initials                   |                           |                                |

**ADDRESS**  
24296

**TITLE**  
Wide-angle dewarping method and apparatus

|                                    |   |   |
|------------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>1010 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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